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Approved for use through 1/31/2007, OMB 0651-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/541,380			ing Date 06/2005	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
	FOR	N	JMBER FIL	.ED NUI	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
×	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A	1	N/A			N/A	300
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1 16(o), (p),	E or (q))	N/A		N/A		N/A			N/A	
TO' (37	FAL CLAIMS CFR 1.16(i))		minus 20 =			]	x \$ =		OR	x s =	
	EPENDENT CLAIN CFR 1.16(h))	IS	m	inus 3 = *		l	X \$ = 1		1	X \$ =	
	APPLICATION SIZE 37 CFR 1.16(s))	ation and drawing er, the application for small entity) sheets or fraction a)(1)(G) and 37	n size fee due for each n thereof. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL	300
	APPLICATION AS AMENDED – PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST							L ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT	06/10/2011	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 13	Minus	20	= 0	ı	X \$ =		OR	X \$52=	0
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	Application Size Fee (37 CFR 1.16(s))					l			_		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT GLAIM (37 CFR 1.16(j))					П	1		OR		
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2)	(Column 3)						
ENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,15(i))		Minus		-		X \$ =		OR	X S =	
M	Independent (37 CFR 1 16(h))		Minus	***	-	l	X \$ =		OR	x s =	
Ų.	Application Size Fee (37 CFR 1.16(s))					l			l		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))					l			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
*If the entry in column 1 is less than the entry in column 2, write "0 in column 3. Legal Instrument Examiner:  *If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".  *If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.  This solection of Information is required by 3 CFET 1.16. This information is required to obtain or train a benefit by the quick which is to file (and by the USPTO to											

into consciond information is required by 3 of Let 1. 16. The findmand in sequence of contain of retain a content of year public window in the land of year process) an application. Confidentially is governed by 38 U.S.C. 122 and 37 CH14. This condition is estimated to late 2 initiaties to one project, including gathering, preparing, and submitting the completed application form to the USPTO. Time will way depending upon the individual case. Any comments on the amount of time you require to complete this form and ors suggestions for reducing this burdon, should be sent to the Cell eliteration (2). Set Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 2231-0. DN OT SEND, PEES OR COMPLETE PORTINS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 2231-31-350.